

## Kerry Healey Lieutenant Governor

## THE COMMONWEALTH OF MASSACHUSETTS

## Board of Building Regulations and Standards Home Improvement Contractor Registration Program 1 Ashburton Place, Room 1301 Boston, MA 02108 (617) 727-3200

## **Request For Duplicate Registration Card**

Robert A. Anderson Deputy Administrator

Please complete (print) this form in ink and mail it to the above address with a certified check or money order for \$25, payable to: Commonwealth of Massachusetts. (NOTE: Personal or business checks will be accepted but will require an additional ten (10) days to process.)

| REGISTRATION NUMBER (if known):                                      |                       |
|--|-----------------------|
| REGISTRATION (COMPANY) NAME:   |                       |
| BUSINESS ADDRESS:  |                       |
| MAILING ADDRESS (if different):                                      |                       |
|  |                       |
| INDIVIDUAL RESPONSIBLE FOR HOME IMPROVEMENT CONTRACTS:               |                       |
| SIGANTURE <u>OF RESPONSIBLE PERSON</u> REQUIRED IN ORDER TO PROCESS: |                       |
| SIGNATURE:   |                       |
| TELEPHONE NUMBER:()  |                       |
|  |                       |
| LOST CARD WAS:ONLY CARD ISSUEDSUPPLEMENTARY CARD                     |                       |
| IF SUPPLEMENTARY CARD:   |                       |
| NAME OF PERSON ISSUED CARD:  |                       |
| SIGNATURE OF CARDHOLDER:   |                       |
|  |                       |
|  |                       |
|  | FOR OFFICIAL USE ONLY |
|  | REGISTRATION NUMBER:  |
|  | DUPLICATE ISSUED BY:  |
|  | <b>DATE</b> :         |